Case 08-11834 B1 (Official Form 1) (1/08)

Doc 1-1 Filed 05/09/08 Entered 05/09/08 12:15:46 Desc Petition Page 1 of 39 **United States Bankruptcy Court Voluntary Petition Northern District of Illinois** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Laurich, Toni H All Other Names used by the Joint Debtor in the last 8 years All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 2701 EIN (if more than one, state all): Street Address of Debtor (No. & Street, City, State & Zip Code): Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 1713 E Grand Ave Lindenhurst, IL ZIPCODE 60046 ZIPCODE County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Lake Mailing Address of Debtor (if different from street address) Mailing Address of Joint Debtor (if different from street address): ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor (if different from street address above): ZIPCODE Type of Debtor Chapter of Bankruptcy Code Under Which Nature of Business (Form of Organization) (Check one box.) the Petition is Filed (Check one box.) (Check one box.) Chapter 7 Chapter 15 Petition for Health Care Business ✓ Individual (includes Joint Debtors) Single Asset Real Estate as defined in 11 Chapter 9 Recognition of a Foreign U.S.C. § 101(51B) See Exhibit D on page 2 of this form. Chapter 11 Main Proceeding Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Stockbroker Partnership Chapter 13 Recognition of a Foreign Commodity Broker Other (If debtor is not one of the above entities, Nonmain Proceeding check this box and state type of entity below.) Clearing Bank **Nature of Debts** Other (Check one box.) Debts are primarily Debts are primarily consumer Tax-Exempt Entity debts, defined in 11 U.S.C. business debts. § 101(8) as "incurred by an (Check box, if applicable.) Debtor is a tax-exempt organization under individual primarily for a personal, family, or house-Title 26 of the United States Code (the Internal Revenue Code). hold purpose." Filing Fee (Check one box) **Chapter 11 Debtors** Check one box: Full Filing Fee attached Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. ☐ A plan is being filed with this petition
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. 🗹 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors  $\checkmark$ 200-999 1.000-5,001-25,001-50.001-1-49 100-199 10,001-Over 5,000 10,000 25,000 50,000 100,000 100,000 Estimated Assets  $\checkmark$ \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 \$50,000,001 to \$100,000,001 \$500,000,001 More than \$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million \$100 million to \$500 million to \$1 billion \$1 billion

Estimated Liabilities

\$0 to

 $\checkmark$ 

\$10 million

\$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001

\$1 million

to \$50 million \$100 million

\$50,000,001 to

\$100,000,001

to \$500 million to \$1 billion

\$500,000,001 More than

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Case 08-11834 Doc 1-1 Filed 05/09/08	Entered 05/09/08 12:1	5:46 Desc Petition Page 2			
Voluntary Petition (This page must be completed and filed in every case)	2 of 39  Name of Debtor(s):  Laurich, Toni H	1 age 2			
Prior Bankruptcy Case Filed Within Last 8	Years (If more than two, attach	additional sheet)			
Location Where Filed: <b>None</b>	Case Number:	Date Filed:			
Location Where Filed:	Case Number:	Date Filed:			
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)			
Name of Debtor: None	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.				
	X /s/ Paul R. Idlas	5/09/08			
	Signature of Attorney for Debtor(s)	Date			
Yes, and Exhibit C is attached and made a part of this petition.  No  Exhibit C is attached and made a part of this petition.  Exhibit C is attached and made a part of this petition.  Exhibit D completed by every individual debtor. If a joint petition is filed, early individual debtor is attached and made in this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached and signed by the joint debtor is attached.	ach spouse must complete and attade a part of this petition.	ch a separate Exhibit D.)			
	4 D14 T				
Information Regardir  (Check any ap  ✓ Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180  ☐ There is a bankruptcy case concerning debtor's affiliate, general principal place of the preceding the date of this petition or for a longer part of such 180	oplicable box.)  of business, or principal assets in the days than in any other District.				
or has no principal place of business or assets in the United States b	Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.				
Certification by a Debtor Who Reside	es as a Tenant of Residential l	Property			
(Check all app  Landlord has a judgment against the debtor for possession of deb		omplete the following.)			
(Name of landlord or lesso	or that obtained judgment)				
(Address of lan	dlord or lessor)				
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for possible.					
Debtor has included in this petition the deposit with the court of a filing of the petition.	any rent that would become due du	aring the 30-day period after the			
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).				

### **Voluntary Petition** (This page must be completed and filed in every case)

Name of Debtor(s): Laurich, Toni H

#### **Signatures**

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### /s/ Toni H Laurich Toni H Laurich Signature of Debtor Χ

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 9, 2008

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

e		
	re	e

#### Signature of Attorney\*

#### $\mathsf{X}$ /s/ Paul R. Idlas

Signature of Attorney for Debtor(s)

#### Paul R. Idlas

Printed Name of Attorney for Debtor(s)

#### Law Office of Paul R. Idlas

Firm Name

1099 N. Corporate Cir.

Address

Grayslake, IL 60030

Telephone Number

#### May 9, 2008

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signatur	e of Authorize	ed Individual		
Printed 1	Name of Auth	orized Individu	al	
Title of	Authorized In	dividual		

#### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address	

Signature of Bankruptcy Petition Preparer or officer, pr
artner whose social security number is provided above

incipal, responsible person, or

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 08-11834 Official Form 1, Exhibit D (10/06)

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United States Bankruptcy Court	
Northern District of Illinois	

IN RE:	Case No
Laurich, Toni H	Chapter 7
Do	nr(c)

Debtor(s) EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities. Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone. 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Toni H Laurich

Date: May 9, 2008

### $_{B6\;Summa}$ Case 08 11834 (12/D) oc 1-1 Filed 05/09/08 Entered 05/09/08 12:15:46 Desc Petition

#### Page 5 of 39 United States Bankruptcy Court Northern District of Illinois

IN RE:		Case No.
Laurich, Toni H		Chapter 7
·	Debtor(s)	•

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 350,000.00		
B - Personal Property	Yes	3	\$ 40,395.38		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 383,006.25	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 8,437.75	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 84,422.94	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 4,487.51
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$ 4,444.46
	TOTAL	16	\$ 390,395.38	\$ 475,866.94	

### Form 6 - SCase 08-11834 Doc 1-1 Filed 05/09/08 Entered 05/09/08 12:15:46 Desc Petition

Page 6 of 39 **United States Bankruptcy Court** 

### **Northern District of Illinois**

IN RE:		Case No
Laurich, Toni H		Chapter 7
	Debtor(s)	* -

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 8,437.75
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 8,437.75

#### **State the following:**

Average Income (from Schedule I, Line 16)	\$ 4,487.51
Average Expenses (from Schedule J, Line 18)	\$ 4,444.46
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C	
Line 20)	\$ 5,562.87

#### **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 20,991.25
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 8,437.75	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 84,422.94
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 105,414.19

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IN RE Laurich, Toni H

Debtor(s)

Case No. (If known)

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
1713 Grand Ave	Fee Simple	1	350.000.00	364.555.00
1713 Grand Ave Lindenhurst, IL 60046	Fee Simple	W W	350,000.00	364,555.00

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TOTAL |

350,000.00

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IN RE Laurich, Toni H

Case No. \_\_\_\_\_\_

Debtor(s)

(If known)

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		Cash on hand	W	15.00
2.	Checking, savings or other financial		Checking - State Bank of Lakes	W	250.00
	accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Savings - State Bank of Lakes	W	250.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Washer, dryer, stove/oven, refrigerator, 4 tvs, dvd player, couch, tables, lamps, chairs, 5 beds, 4 dressers, dishes, pots and pans, utensils, other misc personal property	W	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Wearing apparel	W	400.00
7.	Furs and jewelry.		Furs and jewelry	W	25.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Abbott 401K	W	22,525.38
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			

\_\_ Case No. \_\_

Debtor(s)

(If known)

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

				-	
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2000 Pontiac Grand Am 2007 Hyundai Tucson GLS Sport Utility	W W	2,915.00 12,015.00
		x		••	12,010.00
	Boats, motors, and accessories.	X			
	Aircraft and accessories.	X			
	Office equipment, furnishings, and supplies.	X			
	Machinery, fixtures, equipment, and supplies used in business.	X			
	Inventory.	X			
31.	Animals.				

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IN RE Laurich, Toni H

Case No. \_

Debtor(s)

(If known)

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
<ul> <li>32. Crops - growing or harvested. Give particulars.</li> <li>33. Farming equipment and implements.</li> <li>34. Farm supplies, chemicals, and feed.</li> <li>35. Other personal property of any kind not already listed. Itemize.</li> </ul>	x x x x			
		TO	ΓAL	40,395.38

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IN RE Laurich, Toni H Case No. \_ Debtor(s)

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debt	tor is entitled under:
(Check one box)	

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

(If known)

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Cash on hand	735 ILCS 5 §12-1001(b)	15.00	15.0
Checking - State Bank of Lakes	735 ILCS 5 §12-1001(b)	250.00	250.0
Savings - State Bank of Lakes	735 ILCS 5 §12-1001(b)	250.00	250.0
Washer, dryer, stove/oven, refrigerator, 4 tvs, dvd player, couch, tables, lamps, chairs, 5 beds, 4 dressers, dishes, pots and pans, utensils, other misc personal property	735 ILCS 5 §12-1001(b)	2,000.00	2,000.0
Wearing apparel	735 ILCS 5 §12-1001(a)	400.00	400.0
Furs and jewelry	735 ILCS 5 §12-1001(b)	25.00	25.0
Abbott 401K	40 ILCS 5 §§22-230, 4-135, 6-213, 19-117	22,525.38	22,525.3

IN RE Laurich, Toni H

\_\_\_\_ Case No.

(If known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Debtor(s)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 128177467		w	1st Mortgage: 1713 Grand Ave,		T		315,000.00	
Countrywide 7105 Corporate Drive Plano, TX 75024-4100			Lindenhurst, IL 60046					
			VALUE \$ 350,000.00					
ACCOUNT NO.			Assignee or other notification for:					
Pierce & Assoc. 1 N. Dearborn Suite 1300 Chicago, IL 60602			Countrywide					
			VALUE \$					
ACCOUNT NO. 8656233267		w	2nd Mortgage: 1713 Grand Ave,				49,555.00	14,555.00
Ditech PO Box 205 Waterloo, IA 50704-0205		   	Lindenhurst, IL 60046					
			VALUE \$ 350,000.00					
ACCOUNT NO. 20071205142956		w	2007 Hyundai Tucson GLS Sport Utility				18,451.25	6,436.25
Hyundai Motor Finance Co. PO Box 20829 Fountain Valley, CA 92728-0829								
			VALUE \$ 12,015.00					
ocntinuation sheets attached	•		(Total of t	Sul his p			\$ 383,006.25	\$ 20,991.25
			(Use only on l		Tota page		\$ 383,006.25	\$ 20,991.25

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

36E (Offic Gase, 08-11834	Doc 1-1	Filed 05/09/08	Entered 05/09/08 12:15:46	Desc Petition
Joe (Official Portifice) (12/07)		Page	13 of 39	
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IN RE Laurich, Toni H

1 continuation sheets attached

Debtor(s)

(If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). **Deposits by individuals** Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). **▼** Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

IN RE Laurich, Toni H

(If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

#### **Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

			(Type of Priority for Claims Listed on This Shee	ι)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>06-02-102-009</b>		w	Property Taxes						
Lake County Collection 18 N. County St. Waukegan, IL 60088			1713 Grand Ave Lindenhurst, IL 60046				0.407.75	0.407.75	
ACCOUNT NO.	╁			╁			8,437.75	8,437.75	
ACCOUNT NO.									
ACCOUNT NO.	İ								
ACCOUNT NO.									
ACCOUNT NO.									
ACCOUNT NO.									
Sheet no. 1 of 1 continuation sheet:		1. '							
Sheet no <b>1</b> of <b>1</b> continuation sheet. Schedule of Creditors Holding Unsecured Priority	catt Cla	acned aims	to (Totals of t	Sub his p			\$ 8,437.75	\$ 8,437.75	\$
(Use only on last page of the com	plet	ed Sch	nedule E. Report also on the Summary of Sci	hedu	Tot iles Tot	s.)	\$ 8,437.75		
(Us report also on th	e oi	nly on atistic	last page of the completed Schedule E. If ap al Summary of Certain Liabilities and Relate	plic	abl	e,		\$ <b>8,437.75</b>	\$

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IN RE Laurich, Toni H

Debtor(s)

(If known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>4319-0410-1002-4265</b>		W					
Bank Of America PO Box 15026 Wilimington, DE 19850-5026							11,760.20
ACCOUNT NO. 4037-8400-1084-0757		W				П	-
Cardmember Service US Bank P.O. Box 108 St Louis, MO 63166							7,194.89
ACCOUNT NO. <b>5458-0012-0600-6631</b>		w				П	, = ===
Cardmember Services HSBC Card Services P.O. Box 5250 Carol Stream, IL 60197-5250							10,618.57
ACCOUNT NO. <b>146531a</b>		w		П		П	
Certified Services Gurnee Radiology Center PO Box 177 Waukegan, IL 60079							
						Ц	119.45
2 continuation sheets attached			(Total of th	-	age	)	\$ 29,693.11
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the St Summary of Certain Liabilities and Relate	also atis	tica	n al	\$

IN RE Laurich, Toni H

Debtor(s)

\_ Case No. \_

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		- (1	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4104-1391-1057-3865		w					
Chase Bank USA, N.A. PO Box 100043 Kennesaw, GA 30156							5,395.66
ACCOUNT NO. <b>5424-1805-6838-1633</b>		w					, , , , , , , ,
Citi Cards P.O. Box 6000 The Lakes, NV 89163-6000							13,064.26
ACCOUNT NO. <b>6011-0072-0234-9758</b>		w		$\vdash$			10,004.20
Discover More Card P.O. Box 30943 Salt Lake City, UT 84130							11,685.53
ACCOUNT NO. <b>0335812988</b>		w					11,000.00
Kohl's Po Box 3043 Milwaukee, WI 53201-3043							
ACCOUNT NO. <b>62116132</b>		w					2,351.28
Lake Forest Hospital 75 Remittance Dr. Suite 6802 Chicago, IL 60675							85.40
A COOLINE NO			Assignee or other notification for:	$\vdash$			65.40
ACCOUNT NO.  Malcolm S. Gerald & Assoc. 332 South Michigan Ave Suite 600 Chicago, IL 60604			Lake Forest Hospital				
ACCOUNT NO. <b>4352-3783-5226-7922</b>	H	W		$\vdash$			
Target National Bank C/O Target Credit Services P.O. Box 1581 Minneapolis, MN 55440-1581							12,590.02
Sheet no. 1 of 2 continuation sheets attached to				L Sub			
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	als	Fota o o stica	al n al	\$ <b>45,172.15</b> \$

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#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

			Continuation Sheet)	_			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4465-4201-4217-6262		w		П			
Wells Fargo Card Services P.O. Box 10347 Des Moines, IA 50306							9,557.68
ACCOUNT NO.							,
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.				H		$\dashv$	
Sheet no2 of2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th		age	)	\$ 9,557.68
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related	als atis	tica	n al	\$ 84,422.94

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#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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(If known)

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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Debtor's Marital Status

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Case No.

DEPENDENTS OF DEBTOR AND SPOUSE

Debtor(s)

(If known)

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Divorced		RELATIONSHIP(S): Daughter Son Son Son				AGE(S): 19 17 15 12	
EMPLOYMENT:		DEBTOR		SPOUSE			
Occupation Human Resources  Name of Employer Abbott Laboratories  How long employed 6 years  Address of Employer 1401 Sheridan Rd North Chicago, IL 60064							
1. Current monthly	gross wages, sa	r projected monthly income at time case filed) llary, and commissions (prorate if not paid mor	nthly)	\$	DEBTOR <b>6,110.35</b>		SPOUSE
2. Estimated month	ly overtime			\$		\$	
3. SUBTOTAL				\$	6,110.35	\$	
<ul><li>4. LESS PAYROLI</li><li>a. Payroll taxes a</li><li>b. Insurance</li><li>c. Union dues</li><li>d. Other (specify)</li></ul>	nd Social Secur			\$ \$ \$	214.81	\$	
( I	SRP			\$	121.94		
5. SUBTOTAL O	F PAYROLL D	DEDUCTIONS		\$	1,622.84	\$	
6. TOTAL NET M	IONTHLY TA	KE HOME PAY		\$	4,487.51	\$	
8. Income from rea 9. Interest and divide	l property lends	of business or profession or farm (attach detaile		\$ \$		\$ \$ \$	
10. Alimony, maint that of dependents 11. Social Security	isted above	ort payments payable to the debtor for the debtor ment assistance	or's use or	\$		\$	
(Specify)				\$		\$	
12. Pension or retir				\$ \$		\$ \$	
13. Other monthly in (Specify)				\$		\$	
				\$		\$	
14. SUBTOTAL C	F LINES 7 TH	IROUGH 13		\$		\$	
15. AVERAGE M	ONTHLY INC	<b>COME</b> (Add amounts shown on lines 6 and 14)	)	\$	4,487.51	\$	
		<b>ONTHLY INCOME</b> : (Combine column totals tal reported on line 15)	from line 15;		\$	4,487.5	 5 <u>1</u>

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

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IN RE Laurich, Toni H

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Debtor(s)

(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR	<b>(S)</b>	
Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the decon Form22A or 22C.		
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."	a separat	e schedule of
<ul> <li>1. Rent or home mortgage payment (include lot rented for mobile home)</li> <li>a. Are real estate taxes included? Yes No</li> <li>b. Is property insurance included? Yes No</li> </ul>	\$	1,250.00
2. Utilities:		
a. Electricity and heating fuel	\$	300.00
b. Water and sewer	\$	50.00
c. Telephone	\$	200.00
d. Other See Schedule Attached	— \$ —	390.00
3. Home maintenance (repairs and upkeep)	\$	
4. Food	\$	800.00
5. Clothing	\$	20.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	185.00
<ul><li>8. Transportation (not including car payments)</li><li>9. Recreation, clubs and entertainment, newspapers, magazines, etc.</li></ul>	\$	325.00 20.00
10. Charitable contributions	\$ \$	20.00
11. Insurance (not deducted from wages or included in home mortgage payments)	Ψ	
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health	\$	
d. Auto	\$	280.00
e. Other	— ţ —	
12. Taxes (not deducted from wages or included in home mortgage payments)	Ф	
(Specify)	\$	
	\$	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	315.00
b. Other Other	— \$ —	384.46
14. Alimony, maintenance, and support paid to others	— \$ —	
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other Misc	\$	100.00
	\$	
	\$	
<b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if		
applicable, on the Statistical Summary of Certain Liabilities and Related Data.	l <sub>s</sub>	4,444.46
	<u> </u>	•
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing o Debtor will surrender home and not make mortgage payments. Rent of \$1250 per month is expected after Utilities are estimated for rented home		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	4,487.51
b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	¢	4,444.46 43.05
- 1.1011111 <sub>1</sub> 11001110 (w. 11111100 0.)	Ψ	.0.00

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Debtor(s)

 ${\bf SCHEDULE\ J-CURRENT\ EXPENDITURES\ OF\ INDIVIDUAL\ DEBTOR(S)}$ 

Continuation Sheet - Page 1 of 1

Other Utilities
Comcast
AT&T
Verizon-Cell Phone

105.00 85.00

200.00

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Debtor(s)

(If known)

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: May 9, 2008 Signature: /s/ Toni H Laurich Debtor Toni H Laurich Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP I, the (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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Northern District of Illinois

IN RE:	Case No	
Laurich, Toni H	Chapter 7	
De	tor(s)	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

#### 1. Income from employment or operation of business

None	State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business
	including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this
_	case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that
	maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the
	beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing
	under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a
	joint petition is not filed.)

AMOUNT SOURCE 47,835.00 2006 52,044.00 2007 20,410.56 2008

#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

one	a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other
	debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that
	constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of
	a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit
	counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint
	petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Hyundai Motor Credit** 

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0.00

0.00

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b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None
a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Paul R. Idlas
1099 North Corporate Circle
Grayslake, IL 60030

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR April 28, 2008 AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 1,000.00

	Case 08-11834	Doc 1-1		Entered 05/09/08 26 of 39	12:15:46	Desc Petition
10. O	ther transfers		- uge	20 01 00		
None	absolutely or as security wi	thin two years	immediately preceding t	the commencement of this case	se. (Married de	rs of the debtor, transferred either ebtors filing under chapter 12 or pouses are separated and a joint
	E AND ADDRESS OF TRA ATIONSHIP TO DEBTOR Idai	NSFEREE,	DATE <b>December</b>	2007	AND VALU  Traded in	PROPERTY TRANSFERRED JE RECEIVED 1999 Chevy Van in n with purchase of Hyundai
None	b. List all property transferred device of which the debtor			ately preceding the commence	ement of this ca	ase to a self-settled trust or similar
11. C	losed financial accounts					
	certificates of deposit, or of brokerage houses and other	ther instruments financial instit	s; shares and share accou utions. (Married debtors er or both spouses wheth	ints held in banks, credit unio filing under chapter 12 or ch er or not a joint petition is fil	ons, pension funapter 13 must ed, unless the	ngs, or other financial accounts, ands, cooperatives, associations, include information concerning spouses are separated and a joint
Nortl	E AND ADDRESS OF INS h Shore Trust And Savin enhurst, IL			NUMBER OF ACCOUNT JNT OF FINAL BALANCE	OR CLOSIN	AND DATE OF SALE NG :losed on 11-6-07
	h Shore Trust And Savin enhurst, IL	gs	CD		\$15598.68	closed on 7-5-07
12. Sa	afe deposit boxes					
None	preceding the commencement	ent of this case.	(Married debtors filing u		must include l	oles within <b>one year</b> immediately boxes or depositories of either or filed.)
13. Se	etoffs					
None		g under chapter	12 or chapter 13 must in	nclude information concernin		the spouses whether or not a joint
14. P	roperty held for another pe	rson				
None	List all property owned by	another person	that the debtor holds or c	controls.		

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#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case,

identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\checkmark$ 

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

 $\checkmark$ 

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

 $\checkmark$ 

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: May 9, 2008	Signature /s/ Toni H Laurich	
	of Debtor	Toni H Laurich
Date:	Signature	
	of Joint Debtor	
	(if any)	
	<b>0</b> continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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IN RE:			Case No.	Case No				
Laurich, Toni H			Chapter <b>7</b>	Chapter <b>7</b>				
	De	btor(s)	•					
	CHAPTER 7 INI	DIVIDUAL DEBTOR'S STATEM	ENT OF INTEN	TION				
I have filed a sc	chedule of executory contracts	which includes debts secured by property of and unexpired leases which includes person the property of the estate which secures those	al property subject to	an unexpir lease:	ed lease.			
Description of Secured Prop	perty	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)		
1713 Grand Ave 1713 Grand Ave 2007 Hyundai Ti		Countrywide Ditech Hyundai Motor Finance Co.	<b>✓ ✓</b>			<b>√</b>		
Description of Leased Prope		Lessor's Name				Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)		
05/09/2008	/s/ Toni H Laurich							
Date	Toni H Laurich	Debtor		Joi	nt Debtor (i	f applicable)		
I declare under pe compensation and and 342 (b); and, ( bankruptcy petition	enalty of perjury that: (1) I are have provided the debtor with (3) if rules or guidelines have	of Non-Attorney Bankruptcy In a bankruptcy petition preparer as defined a copy of this document and the notices and been promulgated pursuant to 11 U.S.C. § btor notice of the maximum amount before pon.	I in 11 U.S.C. § 110; information required (110(h) setting a maxir	(2) I prejunder 11 Unum fee fo	pared this d J.S.C. §§ 110 or services cl	ocument for 0(b), 110(h), nargeable by		
If the bankruptcy p	ne and Title, if any, of Bankruptcy petition preparer is not an inda, or partner who signs the doc	lividual, state the name, title (if any), addr	Social Security ess, and social securit	_				
Address								
Signature of Bankrup	tcy Petition Preparer		Date					
Names and Social S is not an individua		dividuals who prepared or assisted in prepar	ing this document, unle	ess the ban	kruptcy peti	tion preparer		

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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IN RE:		Case No
Laurich, Toni H		Chapter 7
	Debtor(s)	•
	VERIFICATION OF CRED	ITOR MATRIX
		Number of Creditors17
The above-named Debtor(s) he	ereby verifies that the list of creditors i	s true and correct to the best of my (our) knowledge.
Date: May 9, 2008	/s/ Toni H Laurich Debtor	
	Design	
	Ioint Debtor	

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Laurich, Toni H 1713 E Grand Ave Lindenhurst, IL 60046 Ditech PO Box 205 Waterloo, IA 50704-0205

Law Office of Paul R. Idlas 1099 N. Corporate Cir. Grayslake, IL 60030 Hyundai Motor Finance Co. PO Box 20829 Fountain Valley, CA 92728-0829

Bank Of America PO Box 15026 Willimington, DE 19850-5026 Kohl's Po Box 3043 Milwaukee, WI 53201-3043

Cardmember Service US Bank P.O. Box 108 St Louis, MO 63166 Lake County Collection 18 N. County St. Waukegan, IL 60088

Cardmember Services HSBC Card Services P.O. Box 5250 Carol Stream, IL 60197-5250 Lake Forest Hospital 75 Remittance Dr. Suite 6802 Chicago, IL 60675

Certified Services Gurnee Radiology Center PO Box 177 Waukegan, IL 60079 Malcolm S. Gerald & Assoc. 332 South Michigan Ave Suite 600 Chicago, IL 60604

Chase Bank USA, N.A. PO Box 100043 Kennesaw, GA 30156 Pierce & Assoc. 1 N. Dearborn Suite 1300 Chicago, IL 60602

Citi Cards P.O. Box 6000 The Lakes, NV 89163-6000 Target National Bank C/O Target Credit Services P.O. Box 1581 Minneapolis, MN 55440-1581

Countrywide 7105 Corporate Drive Plano, TX 75024-4100 Wells Fargo Card Services P.O. Box 10347 Des Moines, IA 50306

Discover More Card P.O. Box 30943 Salt Lake City, UT 84130

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United States Bankruptcy Court
Northern District of Illinois

IN	RE:		Case No.	
La	urich, Toni H		Chapter <b>7</b>	
	Deb	tor(s)	<u> </u>	
	DISCLOSURE O	F COMPENSATION OF A	TTORNEY FOR DEBTOR	
1.		cy, or agreed to be paid to me, for services	for the above-named debtor(s) and that compensation paid to me was rendered or to be rendered on behalf of the debtor(s) in contemplation.	
	For legal services, I have agreed to accept		\$\$	0.00
	Prior to the filing of this statement I have received .		ss2,000	0.00
	Balance Due		s	0.00
2.	The source of the compensation paid to me was:	Debtor Other (specify):		
3.	The source of compensation to be paid to me is:	Debtor Other (specify):		
4.	I have not agreed to share the above-disclosed of	compensation with any other person unless	they are members and associates of my law firm.	
	I have agreed to share the above-disclosed com together with a list of the names of the people s		re not members or associates of my law firm. A copy of the agree	nent
5.	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspects of the	bankruptcy case, including:	
6.	<ul> <li>a. Analysis of the debtor's financial situation, and</li> <li>b. Preparation and filing of any petition, schedules</li> <li>c. Representation of the debtor at the meeting of of Representation of the debtor in adversary proces</li> <li>e. [Other provisions as needed]</li> </ul> By agreement with the debtor(s), the above disclosed	s, statement of affairs and plan which may creditors and confirmation hearing, and any redings and other contested bankruptey ma	be required; y adjourned hearings thereof; tters;	
		CERTIFICATION		
	certify that the foregoing is a complete statement of a proceeding.	ny agreement or arrangement for payment	to me for representation of the debtor(s) in this bankruptcy	
	May 9, 2008	/s/ Paul R. Idlas		
1 -	Date		Signature of Attorney	

Law Office of Paul R. Idlas

Name of Law Firm

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ı	a <u>yc 32 01 33                               </u>		
B22A (Official Form 22A) (Chapter 7) (01/08)	According to the calculations required by this statement:		
	☐ The presumption arises		
In re: Laurich, Toni H	The presumption does not arise		
Debtor(s)			
Case Number:	(Check the box as directed in Parts I, III, and VI of this statement.)		
(If known)			

### CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. EXCLUSION FOR DISABLED VI	ETERANS AND NON-CONSUM	ER DEBTOR	S		
1A	If you are a disabled veteran described in the Veteran's Veteran's Declaration, (2) check the box for "The pres the verification in Part VIII. Do not complete any of the					
	☐ <b>Veteran's Declaration.</b> By checking this box, I dec in 38 U.S.C. § 3741(1)) whose indebtedness occurred I 10 U.S.C. § 101(d)(1)) or while I was performing a hor	primarily during a period in which I wa	s on active duty	(as defined in		
1B	If your debts are not primarily consumer debts, check to complete any of the remaining parts of this statement.	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
	☐ Declaration of non-consumer debts. By checking	this box, I declare that my debts are no	t primarily consu	ımer debts.		
	Part II. CALCULATION OF MONTH	LY INCOME FOR § 707(b)(7) E	XCLUSION			
	Marital/filing status. Check the box that applies and o	complete the balance of this part of this	statement as dir	ected.		
	a. Unmarried. Complete only Column A ("Debtor					
	b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Co Complete only Column A ("Debtor's Income") for Lines 3-11.					
2	c. Married, not filing jointly, without the declaration Column A ("Debtor's Income") and Column I		e 2.b above. Con	nplete both		
	d. Married, filing jointly. Complete both Column Lines 3-11.	A ("Debtor's Income") and Column	B ("Spouse's In	ncome") for		
	All figures must reflect average monthly income receiv	Column A	Column B			
	the six calendar months prior to filing the bankruptcy c month before the filing. If the amount of monthly incor must divide the six-month total by six, and enter the res	ne varied during the six months, you	Debtor's Income	Spouse's Income		
3	Gross wages, salary, tips, bonuses, overtime, commi	\$ 5,562.87	\$			
4	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.					
	a. Gross receipts	\$				
	b. Ordinary and necessary business expenses	\$				
	c. Business income Subtract Line b from Line a \$					

<u> </u>	diffe not i	ent and other real property income. Subtract Line b from Line a and enter the fference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in art V.								
5	a.	Gross receipts		\$						
	b.	Ordinary and necessary operating	expenses	\$						
	c.	Rent and other real property incom	ne	Subtract 1	Line b fror	n Line a	\$		\$	
6	Inte	rest, dividends, and royalties.					\$		\$	
7	Pens	sion and retirement income.					\$		\$	
8	expe that	amounts paid by another person of the debtor or the debtor's purpose. Do not include alimony of our spouse if Column B is completed	<b>dependents, i</b> r separate main	ncluding c	hild suppo	ort paid for	\$		\$	
9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in									
	cla	employment compensation imed to be a benefit under the cial Security Act	Debtor \$		Spouse S	8	\$		\$	
10	source paid alim Secu a vice a. b.	tal and enter on Line 10	ide alimony or mpleted, but in not include any victim of a war	r separate include all y benefits re	maintenai other pay eceived un	ments of der the Social	\$		\$	
11		total of Current Monthly Income for if Column B is completed, add Line					\$	5,562.87	\$	
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.						\$			5,562.87
		Part III. AP	PLICATION	N OF § 70	7(B)(7) E	XCLUSION				
13		ualized Current Monthly Income nd enter the result.	for § 707(b)(7	). Multiply	the amou	nt from Line 12 b	y the		\$	66,754.44
14	hous	dicable median family income. Enterested the control of the contro						rk of		
	a. Er	nter debtor's state of residence: Illino	ois		_ b. Enter	debtor's househ	ıold si	ze: _ <b>6</b> _	\$	91,434.00
		lication of Section707(b)(7). Check		-						
15	r	The amount on Line 13 is less than not arise" at the top of page 1 of this The amount on Line 13 is more than	statement, and	d complete	Part VIII;	do not complete	Parts	IV, V, VI,	or V	II.

B22A (	Official	Form 22A) (Chapter 7) (01/	08)	.gc 5	4 01 33			
		Part IV. CALCULATI	ON OF CURR	ENT	MONTHLY	INCOME FO	OR § 707(b)(2)	
16	Enter	the amount from Line 12.						\$
Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    S								
	c.						\$	
10		4	(L)(2) C 14 I	17	C I ' 16			\$
18	Curre	ent monthly income for § 707	( <b>b</b> )(2). Subtract 1	Line 17	from Line 16	and enter the re	esult.	\$
		Part V. CAL	CULATION O	F DE	DUCTIONS	FROM INCO	OME	
		Subpart A: Deduct	ions under Stan	dards	of the Interna	l Revenue Ser	vice (IRS)	
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					\$		
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.							
	Hou	sehold members under 65 ye	ars of age	Hou	sehold memb	ers 65 years of	age or older	
	a1.	Allowance per member		a2.	Allowance p	er member		
	b1.	Number of members		b2.	Number of n	nembers		
	c1.	Subtotal		c2.	Subtotal			\$
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).					\$		
	<b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b>							
20B	a.	IRS Housing and Utilities Star	ndards; mortgage	/rental	expense	\$		
		Average Monthly Payment for any, as stated in Line 42	any debts secure	ed by ye	our home, if	\$		
	c.	c. Net mortgage/rental expense Subtract Line b from Line a					•	

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21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:						
				\$			
	an ex	Standards: transportation; vehicle operation/public transportation pense allowance in this category regardless of whether you pay the exegardless of whether you use public transportation.					
	Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.						
22A	$\square 0$	$\square$ 1 $\square$ 2 or more.					
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						
			ance. If you pay the operating	\$			
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						
	www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more						
		wo vehicles.)					
		$\square$ 2 or more.					
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b>						
	a.	IRS Transportation Standards, Ownership Costs	\$				
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$				
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a						
	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.						
24		IRS Transportation Standards, Ownership Costs, Second Car	s s amount less than zero.				
	a.	Average Monthly Payment for any debts secured by Vehicle 2, as	ψ				
	b.	stated in Line 42	\$				
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	¢			

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feder	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employmentaxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.						
Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.							
for te	orm life insurance for yourself. Do not include premiums fo						
requi	red to pay pursuant to the order of a court or administrative	agency, such as spousal or child supp	ort \$				
child empl	Enter the total average monthly amount that you actually exoyment and for education that is required for a physically or	spend for education that is a condition mentally challenged dependent child	n of				
on ch	nildcare—such as baby-sitting, day care, nursery and prescho						
Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in							
Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.							
Tota	I Expenses Allowed under IRS Standards. Enter the total	of Lines 19 through 32.	\$				
expe	nses in the categories set out in lines a-c below that are reaso						
a.	Health Insurance	\$					
b.	Disability Insurance	\$					
c.	Health Savings Account	\$					
Total and enter on Line 34							
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:							
\$							
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.							
	Other feder taxes Other payro and to the for te whole of the requirement of the child employment of the experient Line.  Other spouse a  If yo the spouse the spouse of	Other Necessary Expenses: taxes. Enter the total average month federal, state, and local taxes, other than real estate and sales taxe taxes, social security taxes, and Medicare taxes. Do not include record of the Necessary Expenses: involuntary deductions for emplo payroll deductions that are required for your employment, such as and uniform costs. Do not include discretionary amounts, such as and uniform costs. Do not include discretionary amounts, such other Necessary Expenses: life insurance. Enter total average of term life insurance for yourself. Do not include permiums for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the required to pay pursuant to the order of a court or administrative apaments. Do not include payments on past due obligations in Other Necessary Expenses: education for employment or for child. Enter the total average monthly amount that you actually employment and for education that is required for a physically or whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average on childcare—such as baby-sitting, day care, nursery and preschopayments.  Other Necessary Expenses: health care. Enter the total average expend on health care that is required for the health and welfare expend on health care that is required for the health and welfare or embursed by insurance or paid by a health savings account, and Line 19B. Do not include payments for health insurance or he Other Necessary Expenses: telecommunication services. Enter you actually pay for telecommunication services other than your service—such as pagers, call waiting, caller id, special long distancessary for your health and welfare or that of your dependents.  Subpart B: Additional Expense Ded Note: Do not include any expenses that your dependents.  Health Insurance, Disability Insurance, and Health Savings A expenses in the categories set out in lines a-c below that are reaso spouse, or your dependents.  Heal	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employ taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average month payroll deductions that are required for your employment, such as retirement contributions, union dues and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually provide life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child supp payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include dependent child whom no health care that is required for the health and welfare of yourself or your dependents, that is reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entercline 19B. Do not include payments for health insurance or health savings accounts listed in Line Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services so ther than your basic home telephone and cell phone				

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37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.								
38	you a secon <b>trust</b>	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.							
39	cloth Natio	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.							
40		tinued charitable contributions or financial instruments to a char					\$		
41	Tota	l Additional Expense Deductio	ns under	§ 707(b). Enter the tot	al of Lines 34 thro	ıgh 40	\$		
		S	ubpart C	: Deductions for Deb	t Payment				
	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.								
42		Name of Creditor	Average Monthly Property Securing the Debt Payment		Does payment include taxes or insurance?				
	a.				\$	☐ yes ☐ no			
	b.				\$	yes no			
	c.				\$	☐ yes ☐ no			
				Total: Add	lines a, b and c.		\$		
	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.								
43		Name of Creditor		Property Securing the	e Debt	1/60th of the Cure Amount			
	a.		•			\$			
	b.					\$			
	c.					\$			
					Total: Add	d lines a, b and c.	\$		
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims,								

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	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a cas following chart, multiply the amount in line a by the amount in line b administrative expense.					
	a. Projected average monthly chapter 13 plan payment. \$					
45	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	X				
		Total: Multiply Lines a and b	\$			
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 thr	ough 45.	\$			
	Subpart D: Total Deductions for	rom Income				
47	Total of all deductions allowed under § 707(b)(2). Enter the total of	of Lines 33, 41, and 46.	\$			
	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION					
48	<b>707(b)(2))</b>	\$				
49	Enter the amount from Line 47 (Total of all deductions allowed u	under § 707(b)(2))	\$			
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.					
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.					
	<b>Initial presumption determination.</b> Check the applicable box and p	proceed as directed.				
	The amount on Line 51 is less than \$6,575. Check the box for this statement, and complete the verification in Part VIII. Do not		e top of page 1 of			
52	The amount set forth on Line 51 is more than \$10,950. Check 1 of this statement, and complete the verification in Part VIII. Yo remainder of Part VI.					
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 though 55).					
53	Enter the amount of your total non-priority unsecured debt					
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.					
	<b>Secondary presumption determination.</b> Check the applicable box a	and proceed as directed.				
55	The amount on Line 51 is less than the amount on Line 54. Continuous of page 1 of this statement, and complete the verification		es not arise" at			
	The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					

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#### Part VII. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

	Expense Description	Monthly Amount
a.		\$
b.		\$
c.		\$
	Total: Add Lines a, b and c	\$

#### **Part VIII. VERIFICATION**

I declare under penal	ty of perjury that the	information provided	in this statement is true and	d correct. (If this a joint case,
both debtors must sig	gn.)			

57 Date: **May 9, 2008** 

Signature: /s/ Toni H Laurich

(Debtor)

ate: \_\_\_\_\_

 $Signature: \underline{\hspace{1cm}} \text{(Joint Debtor, if any)}$ 

56